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ABSTRACT

This report was submitted by an Illinois policy subcommittee representing various agencies, parent advocacy groups, and university experts, established to investigate why children with developmental disabilities were frequently being removed from their home schools and communities. The report examines percentages of such children being placed in programs other than their home schools, district funding incentives for placement outside the home school, provision of support services to families, and state philosophy regarding educational placements in the least restrictive environment. An examination of the state of the art and best practices summarizes the literature on families, schools, teachers and other professionals, parents and professionals, and students. Illinois' standing on each issue is considered. Five recommendations are made, including: (1) increase incentives for programs in the home school; (2) increase the amount and type of family support services; (3) reconceptualize case management to better link families with appropriate services; (4) build upon best practice models to develop a better state philosophy regarding integration opportunities for children with disabilities; and (5) support case studies of successful schools and studies which identify steps needed to improve integrated educational opportunities. Appendices list subcommittee members and present Illinois statistical data. (45 references) (DB)

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KEEPING KIDS IN THEIR HOME SCHOOLS

FINAL REPORT:

SUBCOMMITTEE TO THE PUBLIC POLICY COMMITTEE

ILLINOIS PLANNING COUNCIL ON DEVELOPMENTAL DISABILITIES

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September, 1990

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KEEPING KIDS IN THEIR HOME SCHOOLS
FINAL REPORT:
SUBCOMMITTEE TO THE PUBLIC POLICY COMMITTEE
ILLINOIS PLANNING COUNCIL ON
DEVELOPMENTAL DISABILITIES

EXECUTIVE SUMMARY

In the Fall of 1989, an inter-agency, parent advocacy and university Subcommittee to the Public Policy Committee of the Illinois Planning Council on Developmental Disabilities was established to investigate a critical issue in Illinois' special education services for children with developmental disabilities: the numbers of students being removed from their home schools and communities.

The Subcommittee examined why some children were being educated and supported in their home schools, and why others were not. Questions were asked regarding:

- The percentages of children, by cooperative/joint agreement, who were placed in residential or private day school programs as opposed to educational placements in home schools.

- A comparison of district funding incentives to place children in residential or private day programs.

- The provision of support services to families to keep children at home.

- The over-all state philosophy in regard to achieving educational placements in the least restrictive environment (LRE), mainstreaming, and integration of students with disabilities.

The Subcommittee collected and examined placement data by cooperative/joint agreement, and by disability "label." "Best practices" in the areas of integrated education and family support--in Illinois and in other states--were considered. There was a review of the technical aspects of reimbursement/funding practices in Illinois, and there was extensive discussion of the inadequate supports for families in their efforts to maintain their children at home and in the home school.

The need for improvement is obvious. In school year 1986/1987, Illinois ranked **49th** among the states and the District of Columbia in terms of the percentage of children with "mental retardation" placed in "regular classes and resource rooms"; Illinois ranked **45th** in placement of children with "emotional disturbance" (data from the *Eleventh Annual Report to Congress on the Implementation of the Handicapped Act*--see **Table 1** within the main body of this *Report*). Too many children are placed in residential and private day programs, by

too many state agencies. Yet, there are important steps which can be taken to improve the educational opportunities for children with disabilities, and the supports required by their families.

RECOMMENDATIONS OF THE SUBCOMMITTEE

Lou Brown and his colleagues have defined "home school."

> ***A home school is the one a student with severe intellectual disabilities would attend if he or she were not disabled*** (Brown, Long, Udvari-Solner, Davis, VanDeventer, Ahlgren, Johnson, Gruenewaald, & Jorgensen, 1989, p. 1).

The Subcommittee recognizes that this definition of "home school" is not the one currently employed in data collection by the Illinois State Board of Education, nor by other states. It is therefore a model of integrated education to strive for, and it is in this spirit that we employ the definition throughout this report.

The Subcommittee identified major reasons why children with disabilities in Illinois are too often removed from their home schools. **Schools** frequently find it easier and less costly to send children away, rather than to structure the necessary programs in the home school. **Families** often cannot cope; they often are not aware of, nor linked to, the appropriate service or support which acknowledges the values and the uniqueness of each family. **Services**, including educational programs, family support, and case management often are not available. Finally, there is a lack of **vision** state-wide for what is needed at all levels of government to assure that each child with a disability has an opportunity for quality education in his or her home school.

Five (5) recommendations emerged from the work of the Subcommittee. These are detailed in the Report which follows.

1. By increasing incentives for programs in the home school, eliminate the current funding incentives which promote placements of children in residential and private day programs.

2. Increase the amount and types of family support services, so families are able to keep their children with disabilities at home, and in their home schools. A major issue is the dialogue between parents and schools, and the responsibility which schools must take in assuring that ongoing dialogue occurs.

3. Re-conceptualize "case management" to better link families and their children with the appropriate services and supports. This means enhancing and supporting, <u>not</u> supplanting, the family's natural support network.

4. Build upon "best practice" models to develop a more consistent and positive state philosophy in regard to LRE, mainstreaming, and integration opportunities for all children with disabilities.

5. With funding from the Illinois Planning Council on Developmental Disabilities and/or from other state agencies, support case studies of successful schools, and studies (including surveys of families) to better identify the steps needed to improve integrated educational opportunities for Illinois' children with disabilities. A financial analysis should be commissioned, to investigate the incentives which now promote placements outside the home school.

KEEPING KIDS IN THEIR HOME SCHOOLS
FINAL REPORT:
SUBCOMMITTEE TO THE PUBLIC POLICY COMMITTEE
ILLINOIS PLANNING COUNCIL ON
DEVELOPMENTAL DISABILITIES

BACKGROUND

The Public Policy Committee of the Illinois Planning Council on Developmental Disabilities (IPCDD) in the fall of 1989 reviewed critical issues in Illinois' special education services for children with developmental disabilities. To more effectively address the issue of why a significant number of Illinois' students are removed from their home schools and communities, the IPCDD and the Public Policy Committee established an inter-agency Subcommittee, the deliberations and recommendations from which are summarized in this Final Report.

SUBCOMMITTEE MEMBERSHIP

The Subcommittee membership consisted of state agency, consumer, and university representatives. State agencies which were represented included the Department of Children and Family Services (DCFS); the Illinois Department of Public Aid (IDPA); the Department of Mental Health/Developmental Disabilities (DMH/DD); the Department of Rehabilitation Services (DORS); the Division of Services for Crippled Children (DSCC); and the Illinois State Board of Education (ISBE). Three universities (Northern Illinois University, the University of Chicago and The University of Illinois at Chicago) were represented. The Subcommittee included the parent of a school-aged child with a disability.

Seven meetings were held, from October 24, 1989, through June 12, 1990. Appendix I is a list of all subcommittee representatives, and their affiliations.

ORGANIZATION OF THIS REPORT

The *Report* is structured as follows:

- Questions which the Subcommittee on Keeping Kids in Their Home Schools (hereafter "Subcommittee") developed to guide its discussion.

- A review of literature, serving to highlight "state-of-the-art" and "best practices" in addressing the needs of families, and in addressing integrated education for children with disabilities.

- A summary of the Subcommittee's responses to the initial questions about Illinois' educational services for children with disabilities, and services for families.

- Discussion of the five (5) major **Recommendations** developed by the Subcommittee.

QUESTIONS GUIDING THE SUBCOMMITTEE'S DISCUSSIONS

At the first meeting on October 24, 1989, the Subcommittee discussed the charge from the IPCDD's Public Policy Committee, and agreed on a series of questions to guide the Subcommittee's deliberations, and its recommendations.

Question 1: How does Illinois compare to other states in the numbers of children with disabilities served in integrated education environments (the "least restrictive environment--LRE")?

Question 2: Are there major differences between local education agencies (LEA's) or special education cooperatives within Illinois in the provision of opportunities for integrated educational opportunities?

Question 3: Are there funding "incentives" for placements in private residential facilities (in Illinois or out-of-state), or in out-of-school placements in private day facilities?

Question 4: Are there issues related to the degree in which families of children with disabilities are supported in their efforts to maintain their children at home, and in local educational programs?

Question 5: Are there inter-agency problems, relating to the provision of services and supports which are effective in maintaining children with disabilities at home, and in their home schools?

Question 6: Are there problems in Illinois with the over-all philosophy or "vision" for attainment of integrated educational opportunities for all children?

WHAT OTHERS HAVE FOUND: "STATE-OF-THE-ART" AND "BEST PRACTICE"

This review of literature is designed to provide an overview of what others have found in the area of supporting children with disabilities at home and in their home schools. This section is organized into: a) families; b) schools; c) teachers and other professionals; d) parents and professionals; and e) students.

Two sources which are cited extensively below resulted from a leadership institute on community integration, held during November, 1988, in Washington, DC. The leadership institute was sponsored by the National Institute of Disability and Rehabilitation Research, U.S. Department of Education (Project Officer Naomi Karp). Included in the deliberations were parents, and researchers from the Universities of Cincinnati, Connecticut, Illinois at Chicago, Minnesota, and from San Francisco State, Syracuse, and Virginia Commonwealth Universities. The final report, entitled *From Being in the Community to Being Part of the Community* (Taylor, Racino, & Shoultz, 1989), was pulled together by Syracuse University and focused on four areas: community living, families, school, and employment. Recommendations from the Syracuse Leadership Institute which were generated by the "families" work group (Turnbull and Turnbull, 1989) and by the "school" work group (Biklen, 1989) are cited extensively below.

A. FAMILIES

> ***State-of-the-art** in the area of families and disability is the result of policy, families, professionals, and society having moved from one set of assumptions to another....In some cases, model programs, embodying the state-of-the-art exist throughout the country as "islands of excellence." They create tremendous hope and potential for families in that their services are both family respectful and family responsive* (Turnbull & Turnbull, 1989, p. 1).

> ***The most important thing that happens when a child is born with disabilities is that a child is born. The most important thing that happens when a couple becomes parents of a child with disabilities is that a couple becomes parents*** (Ferguson & Asch, in press, p. 1).

Transitions

> ***...the following events are considered to be particularly stressful for families: initial diagnosis, enrollment in school, age of puberty, and transition to adulthood (Bray, Coleman, & Bracken, 1981; Fewell & Vadasy, 1986; Hanline, 1988; Marion, 1981). This concept, combined with a broad understanding of family composition and dynamics, is the basis for the family systems approach (Turnbull, Brotherson, & Summers, 1985). A virtue of this approach is seeing the 'essential similarity in many respects between families of disabled children and families of non-disabled children...' (Mittler, Mittler, & McConachie, 1987, p. 18)*** (Lipsky, 1989, p. 165).

- Every family should have the opportunity to designate the appropriate family members (including extended family) to take on various roles in its and the person's life over the life span, and every family's choices should be based on the preferences and rights of all family members, including the person.

- Families have a variety of support needs over the entire family life span (Turnbull & Turnbull, 1989).

Family Support Services

The following is from Turnbull and Turnbull (1989):

- Families need to be encouraged to dream about what they want for themselves, and they need assistance in making those dreams come true. This assistance can include help in future planning....Planning to fulfill dreams should result in diminished needs for counseling as empowerment through future planning replaces despair.

- Families can benefit from each other. One benefit that many families need is the emotional resiliency and information that other families have acquired about life with disability. Thus, families can benefit from mentor programs that combine experienced and inexperienced families.

- ...For some families, traditional respite care may still be necessary but is rarely sufficient.

- Families need information about and inspiration from people with disabilities who are successfully integrated into community life. Clinical information, alone, does not inspire and raise expectations. Indeed, it can do the opposite. Families need instead to know about and expect excellence.

- Families need encouragement and ways to ensure a functional education is taught in natural environments. This encouragement and help should assist families to enlist the support of the natural helpers in those environments (e.g. family, friends, store clerks, bus drivers, scout leaders). In this way, community-based education will contribute to further skill development and generalization. This means that families need some of the traditional clinical knowledge, too, but for different reasons and different outcomes.

- Many families need new policies to help meet the financial demands associated with disability in the home and family setting....Society and its reactions to policies about families and disability can impose stresses and pressures on families.

- Rather than assuming out-of-home placement is the only alternative possible, families need to learn how to communicate among themselves about their dreams and the reality of family life. They need to know how to communicate among themselves and with policy makers, service providers, and

others about making those dreams come true, how to solve and prevent problems, and how to develop other capacities for community living and integrated services.

Minority and Non-traditional Families

Bristol, Reiche, & Thomas (1987, p. 63) offered guidelines for serving families (cited in Lipsky, 1989, p. 164):

1. Father involvement is a continuum, not a dichotomy, in both single-parent and two-parent families of handicapped children;

2. Persons other than parents contribute significantly to child rearing in these families;

3. Socioeconomic differences between two-parent and single-parent families of handicapped children are important in interpreting research results and family assessments for intervention;

4. Single-parent families of handicapped children do not constitute a homogeneous group;

5) Coping with single parenting of a handicapped child is a process that changes over time; and

6) The deficit model of "broken homes" is not useful or constructive in advancing our knowledge or in providing improved services for families of handicapped children.

Distinguishing the factors that determine responses to children with disabilities among Asian-American, Black-American, and Mexican-American families, Florian (1987) ***identifies differences in family structure and composition, experience with service systems, and cultural values. For example, he notes the prevalence of the extended family in the black community; extended families tend to assume (or at least share) the responsibility for child rearing*** (Lipsky, 1989, p. 165).

Minority and nontraditional families have strengths and support strategies that differ from those of white, middle-class families and may be as or more effective. Support should be developed to supplement individual family styles (Turnbull & Turnbull, 1989).

B. SCHOOLS

> ***It is possible for all students with severe disabilities to attend regular schools*** (Biklen, 1989).

> ***The qualities and practices necessary to make integration work (e.g. teachers to collaborate, school leadership, high expectations for all students, opportunities for experiential learning, parent participation, a belief that the education of each student is equally important, and skilled teaching) are the same qualities and practices that characterize excellent schools*** (Biklen, 1989).

The Characteristics of Integrative Schools

> ***We have come to understand them [mainstreaming failures] not as indications that disabled children are inherently incapable of success in mainstream classrooms. Rather, these supposed failures of mainstreaming are problems of organizational arrangements, internecine politics, and a lack of will and skill of school personnel*** (Bogdan, 1983, p. 428).

Sailor (1989, pp 61-70) outlined five phases involved in achieving the Comprehensive Local School (CLS):

- Phase I (Mainstreaming);
- Phase II (Integration);
- Phase III (Community Intensive Instruction);
- Phase IV (Transition);
- Phase V (Integrated Work and Community Living).

Sailor (1989) noted that Phases I and V overlap responsibilities of agencies other than schools, but allow for State Board of Education coordination, monitoring, and quality control of transdisciplinary functions.

> ***The comprehensive local school [CLS] has at least the following special characteristics: 1) ...age-appropriate for all of its students; 2) Transportation...is integrated to the maximum extent possible....transportation from home to school [should not] exceed 45 minutes one way; 3) ...special classes...are located in the immediate proximity of regular classes serving nondisabled students in the same age group; 4) Procedures...promote interactions between students with disabilities and nondisabled students throughout the school environment; 5) The school reflects, at all times, the natural proportion of students with disabilities in the school district at large....; 6) The school program will at all times promote the inclusion of each disabled student in all school activities...*** (Sailor, 1989, p. 57).

Making the Integration of Students with Disabilities Work

The following recommendations are from Biklen (1989):

- State and local educational agency policy can hasten and enhance the quality of school integration.

- Integration works best when it is consciously planned and administratively supported.

- For integration to work its fullest, educational methods must be technically sophisticated (e.g. communication methods for nonverbal students, curriculum modification, careful matching of instructional methods to student learning styles).

- Integration means physical integration, programmatic integration, and social integration.

- Disseminate case study reports of **individuals** involved in integration. These could focus on how roles change through integration and what the day-to-day lives look like in integrated schools and classrooms. The case studies would feature students, teachers, principals and administrators, parents, and specialists.

- Disseminate information on **systems** practices, including: funding methods in states that have achieved a high level of integration; consulting and support services; inservice training and leadership development approaches; examples of program monitoring; examples of state regulations for placement of students.

- Disseminate case studies on the **conversion** process employed by school districts from special school to regular school and from special classes to regular class placement models.

- Disseminate descriptions of education concepts and practices that facilitate integration (e.g. partial participation, communication technology, and cooperative instruction).

- Develop leadership training institutes for superintendents and school principals. The actual training should occur at model integration sites.

- Statewide and national "teacher institutes on classroom integration."

- Educator exchanges. Students (i.e. teachers) would be able to work in a model school district's integrated classrooms for two weeks.

- Parent institutes on integration. Like the administrators, parents would receive training at model integration training sites.

- Personnel integration. Integration of students occurs more easily when the adults in a school are integrated, for example on grade level or subject area teams, through team teaching, in faculty meetings, in extracurricular events or clubs, and in curriculum development groups.

- Unobtrusive support: Accommodations in a school's procedures or curricula are often necessary to effect integration. Students are less likely to be stigmatized if these accommodations are made unobtrusive (e.g. school jobs can involve pairing students whether or not a student has a disability; sign language can be offered to all students in a class; swimming can be a class outing rather than physical therapy for one or two students).

Schools and Transition

Integrated work and community living is, of course, the ultimate goal of a comprehensive local school educational model. It makes little sense to integrate and mainstream students with severe disabilities for the educational years, only to prepare them to enter a 20- or 30-bed residential institution where they will spend their days in a sheltered workshop or day treatment program. The Comprehensive Local School (CLS) model is thus closely linked to the concepts of transition and supported employment (Will, 1984, 1986, 1988, cited in Sailor, 1989, p. 59).

Model Schools and Best Practices

Biklen (1989) recommended the dissemination of case study information about integration models; the school systems he cited were: Vermont, Madison (WI), Syracuse (NY), Olympia (WA), Littleton (CO), Oregon).

> ***The [CLS] model is futuristic to the extent that it does not exist in its entirety in any form or in any place at present. Many of the components are in place in the San Francisco Unified School District and in school districts in other parts of California. In Hawaii and Vermont, elements of a CLS model are in place: elements of the model are also present in Madison, Wisconsin; Syracuse, New York; parts of Oregon; and DeKalb County in Illinois*** (Sailor, 1989, p. 60).

C. TEACHERS AND OTHER PROFESSIONALS

Allington & McGill-Franzen (1989) recommend a) the "content specialist model" in which all instructional efforts aimed at low-achievement children are merged, regardless of categorical label; and b) the "accountability model," involving elimination of all categorical programs and of specialist teachers (pp. 92-93). For example:

> ***In this accountability model, staff sizes would be reduced through the elimination of about half of the administrators and specialists....While schools would still have the benefit of the expertise of specialist teachers, they would work as classroom teachers and would collaboratively assist other teachers in the preparation of lessons for learners with special instructional needs*** (Allington, in press, cited in Allington & McGill-Franzen, 1989, p. 93).

> ***Our vision...includes a new form of 'master teacher' who would work regularly with other kinds of specialists. The master teacher would have five major assignments: 1) ...role model for new teachers, exhibiting at least some of the alternative ways in which subject matters can be presented to students with different 'intelligence' profiles; 2) ...monitor novice teachers...; 3) ...disseminate [new findings] to [all] other members of the school community...; 4) ...collaborate with the curriculum, community, and assessment specialists...in making sure that the appropriate teachers and sites are available for each student; and 5) to intervene when the program is not successful and to suggest alternative regimens for the student*** (Goldman and Gardner, 1989, p. 136).

> ***A 'master teacher integration program'... would provide expert, veteran teachers with 12 credit hours or the equivalent of a full-time semester to study consultation roles related to integration of students with disabilities. These roles would include: teacher support, curriculum development, enlisting administrative support, and integration of therapies...Personnel requirements of integration point to the need for team teaching, consultant teaching, and other ways of integrating the adults in schools*** (Biklen, 1989).

> ***...separate systems of teacher preparation in special education will go the way of separate systems of education for children....A new focus will emerge on differentiation of specialty area expertise for teachers....Beginning teachers will be provided induction experiences and supervision by mentor teachers who will help them bridge the gap between their preparation experiences and their assumption of full teaching duties. Included in this scenario is a system of national teacher certification, including a basic and advanced national teaching certificate (Carnegie Forum, 1986)....The teacher education system...is based largely on concepts embedded in the 'second wave of educational reform,' which focuses on teacher empowerment, professionalization of teaching, and deregulation of education***

accompanied by increased decision-making and accountability at the school and classroom level (Carnegie Forum, 1986, cited in Lilly, 1989, pp. 146-147).

D. PARENTS AND PROFESSIONALS

The following is from Turnbull and Turnbull (1989):

- Families identify their own needs; the person identifies his or her own needs. They may choose to use or decline to use professional assistance from generic or specialized service professionals to identify or satisfy their preferences and needs.

- Families form a partnership with generic or specialized professionals in designing formal service programs and informal support, choosing the degree to which and ways in which they participate, and helping to modify programs to make them more responsive. Degrees of participation may change over time.

- Many families characterized by racial or ethnic minority and lower socio-economic status have encountered system and individual barriers to establishing partnerships with professionals. Full accommodation should be made based on their individual preferences and needs.

- Formal services are necessary but not sufficient.

- Informal support can be (but is not necessarily always) highly reliable and enduring and usually is a natural resource available to all families. Formal services can be but are not always unreliable and fleeting. A significant need of many families is to find people (professionals and friends) on whom they can unequivocally rely to support them as they seek and participate in community integration. Any kind of support is important if it is meaningful, whether transient or long-lasting.

- Families and professionals should make every effort to identify and use informal resources, consistent with their preferences. Professionals should assist families to do this.

- Families and professionals should try to have professionals become part of their informal network as well (e.g. a teacher becomes a friend to the family and maintains a relationship long after the school years are over)....There is no inconsistency between being a professional and being a friend.

....in a recent survey of special education professionals by Donnellan and Mirenda

> *(1984), 78 percent believed parents were not competent to choose appropriate goals for the children's education, 40 percent thought parents uncooperative, and 38 percent thought them unrealistic....Such feelings, of course, make it difficult for parents to play the roles set out for them in PL 94-142. Similarly, the view fails to recognize the range of characteristics, circumstances, and conditions of parents* (Lipsky, 1989, p. 162).

E. STUDENTS

> *The attitudes of students toward each other improve through exposure and interaction; in other words, integration helps students learn to appreciate and accept each other* (Biklen, 1989).

Achievements of children with disabilities often don't correspond to the developmental models (Gliedman & Roth, 1980); students' adjustment, that is, the interpretive process which they apply to students with disabilities, works with other classmates as well (Asch, 1989).

In discussing how often students with disabilities are excluded from extracurricular social activities, Asch (1989) indicated that in New York, students were "captives" of the Special Education system of transportation.

Better student success comes from heterogeneous classrooms, and with students learning to share with one another and to teach others through special projects, buddy systems, and tutoring programs (Lancioni, 1982; McHale, Olley, Marcus, & Simeonsson, 1981). "Horizontal interactions" (Sailor, 1989, p. 65) are critical, and Sailor (1989) cites Brinker (1985), Brinker and Thorpe (1986) and Anderson and Goetz (1983), on the ways in which "peer tutorials" and "special friends" facilitate horizontal interactions.

WHERE DOES ILLINOIS STAND IN EDUCATING KIDS IN THEIR HOME SCHOOLS, AND IN SUPPORTING FAMILIES?

In this section, the Subcommittee's discussions and review of data are summarized, relative to each of the initial questions which had been developed to guide the work of the Subcommittee.

QUESTION 1: How does Illinois compare to other states in the numbers of children with disabilities served in their home schools?

Table 1 illustrates, for the fifty states, the District of Columbia, and the United States over-all, the relative percentages of children with "Mental Retardation--MR" and with "Emotional Disturbance--ED" who participated in "regular classes" or in classes and

TABLE 1

States Ranked by %age of "MR" and "ED" Students in Regular Education:
School Year 1983/1984 Compared to School Year (1986/1987)

1983/1984 SCHOOL YEAR

Mental Retardation			Emotional Disturbance		
Rank	State	%	Rank	State	%
1	ARIZONA	85.35	1	WISCONSIN	86.75
2	MASSACHUSETTS	75.19	2	ARIZONA	85.05
3	MAINE	72.44	3	UTAH	78.64
4	WISCONSIN	69.09	4	MASSACHUSETTS	76.19
5	NORTH CAROLINA	63.27	5	VERMONT	74.81
6	NEBRASKA	58.96	6	GEORGIA	73.45
7	VERMONT	56.83	7	MAINE	71.96
8	ARKANSAS	55.13	8	ALABAMA	68.22
9	SOUTH CAROLINA	54.25	9	WYOMING	66.31
10	SOUTH DAKOTA	52.08	10	SOUTH CAROLINA	64.60
11	TENNESSEE	50.60	11	NORTH DAKOTA	63.79
12	MISSISSIPPI	47.91	12	COLORADO	63.20
13	OKLAHOMA	46.81	13	NEVADA	57.92
14	WEST VIRGINIA	44.43	14	MONTANA	56.90
15	KENTUCKY	42.28	15	MISSOURI	56.48
16	ALASKA	41.61	16	ARKANSAS	54.44
17	GEORGIA	41.27	17	WEST VIRGINIA	52.79
18	MINNESOTA	39.02	18	TEXAS	52.14
19	ALABAMA	38.21	19	MICHIGAN	51.79
20	OREGON	34.83	20	NEW HAMPSHIRE	51.78
21	NEW HAMPSHIRE	31.54	21	OREGON	51.54
22	WASHINGTON	30.34	22	ALASKA	49.65
23	UNITED STATES	29.69	23	MISSISSIPPI	48.71
24	MISSOURI	29.41	24	NEBRASKA	48.69
25	TEXAS	28.89	25	MINNESOTA	48.48
26	MICHIGAN	25.73	26	FLORIDA	47.71
27	UTAH	24.19	27	WASHINGTON	47.53
28	WYOMING	23.88	28	NORTH CAROLINA	46.61
29	MONTANA	23.09	29	CONNECTICUT	46.47
30	IOWA	22.57	30	KANSAS	46.12
31	COLORADO	17.99	31	TENNESSEE	44.83
32	VIRGINIA	16.37	32	UNITED STATES	44.04
33	DELAWARE	15.36	33	SOUTH DAKOTA	41.48
34	OHIO	14.66	34	IOWA	41.41
35	NEVADA	14.60	35	DELAWARE	36.54
36	INDIANA	13.43	36	INDIANA	33.01
37	CONNECTICUT	13.01	37	RHODE ISLAND	31.96
38	KANSAS	12.96	[illegible]		31.49
39	MARYLAND	12.86	39	VIRGINIA	27.56
40	LOUISIANA	11.43	40	NEW JERSEY	26.96
41	PENNSYLVANIA	10.61	41	PENNSYLVANIA	24.53
42	NORTH DAKOTA	10.40	42	LOUISIANA	24.07
43	NEW JERSEY	7.39	43	KENTUCKY	22.42
[illegible]			44	OKLAHOMA	21.81
45	FLORIDA	6.90	45	MARYLAND	16.56
46	NEW YORK	6.36	46	NEW YORK	14.20
47	RHODE ISLAND	4.83	47	HAWAII	13.32
48	DIST OF COLUM	4.07	48	IDAHO	11.83
49	IDAHO	3.66	49	CALIFORNIA	9.99
50	CALIFORNIA	3.14	50	OHIO	4.74
51	HAWAII	2.48	51	DIST OF COLUM	0.56
52	NEW MEXICO	-	52	NEW MEXICO	-

1986/1987 SCHOOL YEAR

Mental Retardation			Emotional Disturbance		
Rank	State	%	Rank	State	%
1	NEBRASKA	86.89	1	WEST VIRGINIA	86.13
2	TEXAS	80.84	2	NEBRASKA	81.99
3	MASSACHUSETTS	72.97	3	TEXAS	79.91
4	OKLAHOMA	60.52	4	VERMONT	78.74
5	KENTUCKY	60.21	5	UTAH	73.93
6	SOUTH DAKOTA	58.18	6	ALABAMA	73.02
7	ARKANSAS	56.29	7	MASSACHUSETTS	72.99
8	NORTH CAROLINA	51.56	8	GEORGIA	67.85
9	OREGON	47.81	9	NORTH DAKOTA	67.80
10	SOUTH CAROLINA	47.42	10	COLORADO	63.32
11	MAINE	45.92	11	MAINE	62.20
12	VERMONT	45.90	12	WISCONSIN	60.04
13	NEW HAMPSHIRE	43.96	13	OREGON	59.81
14	NEW MEXICO	41.22	14	SOUTH CAROLINA	58.94
15	MISSISSIPPI	39.72	15	MINNESOTA	58.80
16	TENNESSEE	38.84	16	DELAWARE	58.34
17	WYOMING	38.34	17	SOUTH DAKOTA	57.19
18	WASHINGTON	36.77	18	WYOMING	56.14
19	ALASKA	34.77	19	NEW HAMPSHIRE	55.07
20	DELAWARE	34.13	20	MICHIGAN	55.01
21	MINNESOTA	31.82	21	NEW MEXICO	54.30
22	UTAH	30.94	22	NORTH CAROLINA	54.17
23	WEST VIRGINIA	30.90	23	MONTANA	53.26
24	ALABAMA	30.46	24	MISSOURI	51.77
25	NEVADA	30.22	25	ARKANSAS	51.30
26	WISCONSIN	29.89	26	WASHINGTON	49.06
27	UNITED STATES	29.48	27	KENTUCKY	48.91
28	GEORGIA	29.26	28	IDAHO	46.97
29	IDAHO	28.98	29	UNITED STATES	44.32
30	DIST OF COLUM	26.86	30	ARIZONA	43.39
31	MISSOURI	23.39	31	MISSISSIPPI	42.82
32	MONTANA	22.64	32	ALASKA	41.78
33	NORTH DAKOTA	21.81	33	TENNESSEE	41.24
34	HAWAII	21.06	34	FLORIDA	41.04
35	IOWA	21.02	35	KANSAS	40.86
36	MICHIGAN	19.46	36	IOWA	36.90
37	ARIZONA	18.06	37	CONNECTICUT	34.74
38	VIRGINIA	17.29	38	RHODE ISLAND	34.54
39	COLORADO	16.66	39	HAWAII	34.10
40	CONNECTICUT	15.06	40	OKLAHOMA	31.29
41	KANSAS	13.89	41	VIRGINIA	29.86
42	OHIO	13.69	42	INDIANA	28.82
43	PENNSYLVANIA	13.61	43	PENNSYLVANIA	26.09
44	LOUISIANA	12.38	44	NEVADA	24.87
45	MARYLAND	10.30	[illegible]		
46	INDIANA	9.66	46	LOUISIANA	20.79
47	NEW YORK	7.37	47	NEW JERSEY	22.25
48	FLORIDA	6.89	48	NEW YORK	19.39
[illegible]			49	MARYLAND	18.31
50	CALIFORNIA	4.79	50	DIST OF COLUM	16.03
51	NEW JERSEY	4.69	51	CALIFORNIA	9.86
52	RHODE ISLAND	3.66	52	OHIO	9.71

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"resource rooms." The data for school year 1986/1987 were obtained from the *Eleventh Annual Report to Congress on the Implementation of The Education of the Handicapped Act* (U.S. Department of Education, 1989, Table AB1, pp. A-45 and A-47). Data for school year 1983/1984 were obtained from the *Eighth Annual Report* (U.S. Department of Education, 1986, Table GC1, pp. G-41 and G-42).

For children classified as "MR," Illinois ranked **44th** among the states--and including the U.S. average ranking--during school year 1983/1984. Illinois ranked **49th** during school year 1986/1987. For children classified as "ED," Illinois ranked **38th** and **45th** in the two school years.

QUESTION 2: Are there major differences between local education agencies (LEA's) or special education cooperatives ("joint agreements") within Illinois in the provision of opportunities for integrated educational opportunities?

Review of a December, 1988, Illinois State Board of Education (ISBE) computer print-out, and the ISBE's coding system, revealed that "least restrictive environment--LRE" category "codes" **A through E** all represented the involvement of children, more than 50% of the day, in "regular education programs." These codes, therefore, constituted the Subcommittee's definition of **regular education** for the three tables which follow. The definitions of the individual ISBE codes are provided below, organized under the headings (in **bold**) which were utilized in the following three tables (**Tables 2-4**):

Regular Education

A) regular ed, with consultation to and with the teacher, modification of curricular content and/or educational methodology;

B) regular ed with only speech and language services;

C) regular ed with "A," and with "related services";

D) regular ed with special education programs less than 50% of the day; and

E) regular ed with departmentalized special ed less that 50% of the day.

Special Education

F) special ed 50% or more of the day, with some participation in regular education; and

G) departmentalized special ed 50% or more of the day, with some

participation in regular education.

H) full-time special ed class, in a regular school building; and

I) full-time departmentalized special ed class, in a regular school building.

[Codes J through M: Not Specifically Broken Out in Tables 2-4]

J) Full-time special education class in special public day school or separate wing or annex of a regular school building/attendance center;

K) Full-time departmentalized special education class in a special public day school or in a separate wing or annex of a regular school building/attendance center;

L) Residential school operated by a public school district; and

M) Philip J. Rock Center and School (for deaf/blind).

> **Note:** State-wide data, for students with classifications of: Trainable Mentally Handicapped (TMH); Educable Mentally Handicapped (EMH); Severe/Profound Mentally Handicapped (S/PMH); Physically Handicapped/Crippled (PH/C); Deaf/Blind (D/B); and Behavior Disordered (BD) are provided in **Appendix II.** The **Appendix** provides a breakdown by **regular education** (Codes A-E), **special education,** (Codes F-I); "special public school" (Codes J,K); "district residential (Code L); "Phil Rock Center" (Code M); "school in jail" (Code N); "DMH/DD or DCFS" (Code O); "private day school" (Code P); "in-state private residential" (Code Q); "out-of-state" private residential" (Code R); "homebound" (Code S); and "hospital" (Code T). The **Appendix** provides, for each of these codes, and by the student classification categories noted above, a break-out of students a) by P.L. 94-142 and P.L. 89-313; and b) by age-group.

School in Jail (Table 3 only)

N) Full-time special education classes in a county or municipal detention center or jail.

> **Note:** There were only 6 students with "MR" shown in this category of educational placement; all others were students classified as "BD"--see **Appendix II.**

[Code O: Not Specifically Broken Out in Tables 2-4--See Appendix II]

O) Classes on the site of a children's group home, DCFS, or DMH/DD facility.

Private Day/Residential/Out-of-State Public Day

P) Private day school, or out-of-state public day school; and

Q) Private residential facility (in-state), or residential school operated by a public school district (in-state).

Out-of-State Private Residential

R) Private residential facility (out-of-state).

[Codes S, T: Not Specifically Broken Out in Tables 2-4--See Appendix II]

S) Homebound instructional program; and

T) Hospital instructional program.

Given the definitions provided above, **Table 2** demonstrates, for 93 "district/coops" (special education cooperatives/joint agreements) in Illinois, the percentages of students with "MR" (EMH, TMH, and S/PMH) who were served in **Regular**, and in **Special Education**. The "district/coops" are ranked from highest to lowest percentage in **regular education**.

Table 3 demonstrates, for 93 "district/coops," the percentages of students with "MR" who were served in **Private Day/Residential/Out-of-State Public Day**, or in **Out-of-State Private Residential**. The "district/coops" are ranked from highest to lowest percentage in the combined Codes P,Q, and R.

Table 4 demonstrates, for 93 "districts/coops," the percentages of students with "behavior disorders--BD" who were served in a) jail (Code N); b) DCFS/DMHDD (Code O); c) private day/residential/out-of-state public day (Codes P,Q); and "out-of-state private residential" (Code R). The "district/coops" are ranked, from highest to lowest percentage of **private day/out-of-state public day/out-of-state private residential** (Codes P-R); however, percentages for each "district/coop" are provided as well for the students placed in Codes N-R (see the final column of **Table 4**).

TABLE 2*

ILLINOIS SCHOOL DISTRICTS/COOPS, RANKED BY % OF "MR" STUDENTS IN "REGULAR ED"

	District/Coop	Acronym	Codes A–E "Regular Ed"	Codes F–I "Special Ed"	TOTAL "MR" STUDENTS	REGULAR ED PERCENTAGE
1	LAKE OF LINCOLN (CORRECTIONS)		21	9	30	70.0%
2	CAHOKIA AREA JT. AGMT SPED		46	46	127	31.5%
3	NORTHWEST SPED		42	137	158	26.3%
4	WABASH AND OHIO SPED		34	135	217	15.7%
5	WOODFORD COUNTY SPED ASSOC.		6	22	46	13.0%
6	WEST CENTRAL ILL. SPED		46	170	272	14.7%
7	SPED ASSOC. PEORIA COUNTY	SEAPOO	19	47	146	13.1%
8	VERMILION ASSOC. OF SPED		31	184	356	10.6%
9	WAUKEGAN #60 SPED		38	162	321	10.9%
10	SPRINGFIELD #186 SPED		46	333	483	9.9%
11	LOCKPORT AREA SPED COOP		7	44	79	9.2%
12	TRI-COUNTY SPED DIST.		21	113	264	8.0%
13	BLACKHAWK AREA SPED DIST.		39	319	491	7.9%
14	JAMP SPED		13	116	166	7.8%
15	SOUTHEASTERN SPED	SESE	36	309	351	7.9%
16	TAZEWELL-MASON SPED COOP		34	179	351	7.9%
17	HARLEM #122		7	69	86	7.4%
18	LA SALLE COUNTY	LEASE	19	297	377	6.9%
19	VALLEY VIEW #365U SPED		6	69	88	6.9%
20	BANBANON AREA SPED		16	104	147	6.9%
21	KUKE-HAVREN SPED		29	240	360	6.9%
22	LIVINGSTON COUNTY SPED		16	143	188	6.9%
23	RURAL CHAMPAIGN COUNTY SPED		4	67	84	4.8%
24	SUR-MARSH-PUT TRI-COUNTY SPED		8	145	179	4.7%
25	ELGIN #46 SPED		16	284	351	4.7%
26	M COUNTY SPED		10	188	216	4.7%
27	LEE COUNTY SPED		4	72	88	4.8%
28	ENS. CHILDREN HAVE OPPORTUNITY	SCHO	26	369	585	4.4%
29	EAST SUPASE SPED	EDWSD	6	66	138	3.9%
30	MACON-PIATT SPED		8	128	216	3.7%
31	MAS-MAS-JERSEY SPED REGION 9		7	146	186	3.7%
32	MADISON COUNTY SPED REGION 1		6	161	174	3.4%
33	SPED ASSOC. ADAMS COUNTY		6	167	177	3.4%
34	EASTERN ILLINOIS	SIASE	16	388	476	3.4%
35	SPED COOP SOUTH COOK CTY	SPSED	16	388	467	3.5%
36	LA GRANGE AREA SPED	LAGSE	6	148	184	3.5%
37	FOUR RIVERS SPED		9	289	318	3.5%
38	PEKANOKE SPED		2	69	71	3.5%
39	AURORA (EAST) #131 SPED		4	69	161	3.5%
40	DEKALB COUNTY SPED		2	94	80	3.5%
41	LEYDEN AREA SPED		3	94	121	3.5%
42	HENRY–STARK SPED		2	67	86	3.4%
43	OAK PARK #97 SPED		1	41	43	3.5%
44	MID–STATE SPED		8	318	345	3.5%
45	KANKAKEE AREA SPED COOP		4	113	178	3.5%
46	KENDALL COUNTY SPED		1	11	46	3.5%
47	WILLIAMSON COUNTY SPED		2	91	88	3.4%
48	SOUTHWEST COOK CTY COOP ASSOC.		7	324	337	3.1%
49	SPED DISTRICT, MCHENRY COUNTY	SEDCM	9	394	388	3.1%
50	SPED DISTRICT, LAKE COUNTY	SEDCL	13	381	414	3.1%
51	NORTH SUB. SPED	NSSED	4	69	197	3.5%
52	EISENHOWER COOP		4	168	227	1.8%
53	COOP ASSOC. FOR SPED	CASE	3	146	179	1.7%
54	EVANSTON #65 SPED		2	69	139	1.5%
55	BOONE COUNTY SPED		1	36	66	1.5%
56	CHLE COUNTY ED COOP		1	41	67	1.5%
57	SPED ASSOC. FRANKLIN–JEFFERSON		3	158	331	1.5%
58	TRI–CITY SPED ASSOC.		3	154	307	1.4%
59	ROCKFORD #205		6	368	368	1.6%
60	MID VALLEY SPED		1	41	76	1.3%
61	PROVISO AREA EXC. CHLD	PASO	9	167	340	1.1%
62	CHICAGO #299 SPED		87	5,888	5,888	1.1%
63	AERO SPED	AERO	2	116	177	1.1%
64	FOX–ROCKING SPED		1	84	86	1.2%
65	WINNEBAGO COUNTY SPED		1	47	86	1.2%
66	BLOOMINGTON #87 SPED		1	86	116	0.9%
67	NORTHWEST SUB. SPED	NSSED	8	388	461	1.7%
68	KANKAKEE SPED		1	116	204	0.5%
69	FEDERATION OF SEP. FOR SPED	FSSE	1	188	216	0.5%
70	PEORIA #150 SPED		3	466	688	0.4%
71	SCHOOL ASSOC. FOR SPED	SASED	2	466	467	0.4%
72	EAST ST. LOUIS AREA SPED		1	466	888	0.1%
73	ALTON #11 SPED		0	79	111	0.0%
74	AURORA (WEST) #129 SPED		0	84	114	0.0%
75	BELLEVILLE AREA SPED		0	186	888	0.0%
76	CHAMPAIGN #4 SPED		0	88	88	0.0%
77	COLLINSVILLE #10 SPED		0	84	116	0.0%
78	DANSBE #200 SPED		0	88	88	0.0%
79	DWIGHT SCHOOL 1–7 #8 GRANT PSM.		0	88	88	0.0%
80	EVANSTON #202 SPED		0	16	31	0.0%
81	GRUNDY COUNTY SPED		0	88	88	0.0%
82	JOLIET #204 SPED		0	88	79	0.0%
83	JOLIET #86 SPED		0	88	88	0.0%
84	KANKAKEE #111 SPED		0	88	88	0.0%
85	LINCOLNWAY AREA SPED		0	16	88	0.0%
86	LOGAN–MASON–MENARD SE SVC. PSA.		0	0	0	0.0%
87	MARSHAW VALLEY SPED		0	81	88	0.0%
88	MADISON COUNTY SPED REGION 5		0	88	88	0.0%
89	MAINE TWSHP SPED		0	88	134	0.0%
90	MORRIS–RANDOLPH SD. SVC REGION		0	0	0	0.0%
91	NILES TWSHP SPED		0	88	88	0.0%
92	S. WILL COUNTY COOP SPED	SCWSD	0	88	88	0.0%
93	URBANA #116 SPED		0	88	88	0.0%
	ILLINOIS TOTAL		846	16,888	26,888	

* NOTE: These data are preliminary, based upon a December, 1998, computer-generated report from the Illinois State Board of Education—data subject to revision.
Please see preceding pages in the Report for definitions of ISBE placement "codes."

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TABLE 3*

ILLINOIS SCHOOL DISTRICTS/COOPS, RANKED BY % OF "MR" STUDENTS OUT OF HOME SCHOOLS

	District/Coop	Acronym	Code P,Q Private Day/Res./ Out/State Public Day	Code R Out/State Res.	TOTAL "MR" STUDENTS	PRIVATE/ OUT/STATE PERCENTAGE
1	EVANSTON #202 SPED		12	1	31	41.9%
2	S. WILL COUNTY COOP SPED	SCWIC	19	0	54	35.2%
3	KENDALL COUNTY SPED		12	0	46	26.1%
4	GRUNDY COUNTY SPED		13	0	60	21.7%
5	MADISON COUNTY SPED REGION 2		16	0	74	21.6%
6	LOGAN/DE AREA SPED COOP		16	0	76	21.1%
7	MAS-MAC-JERSEY SPED REGION 5		36	0	196	18.4%
8	AURORA (EAST) #131 SPED		35	0	191	17.3%
9	ALTON #11 SPED		19	0	111	17.1%
10	CHICAGO #299 SPED		1,486	4	9,888	15.1%
11	LA SALLE COUNTY	LEASE	44	0	277	15.9%
12	AURORA (WEST) #129 SPED		16	0	114	14.0%
13	SOUTHWEST COOK CTY COOP ASSOC.		39	0	267	14.6%
14	JOLIET #204 SPED		13	0	79	16.5%
15	LINCOLNWAY AREA SPED		9	0	69	13.0%
16	EAST SUBURBS SPED	ESSED	19	1	139	13.7%
17	NORTH SUB. SPED	NSSED	39	3	197	19.8%
18	VALLEY VIEW #365U SPED		11	0	99	11.1%
19	OGLE COUNTY SS COOP		6	0	57	10.5%
20	NORTHWEST SUB. SPED	NSSED	41	14	461	11.4%
21	JOLIET #86 SPED		15	0	134	11.2%
22	BELLEVILLE AREA SPED		34	0	308	10.5%
23	MID VALLEY SPED		8	0	78	10.3%
24	MAINE THSHP SPED		13	1	134	10.4%
25	DUNDEE #300 SPED		12	0	116	10.4%
26	COOP ASSOC. FOR SPED	CASE	19	0	175	10.9%
27	NILES THSHP SPED		19	1	188	10.6%
28	EISENHOWER COOP		36	0	357	10.1%
29	HARLEM #122		9	0	88	10.2%
30	ELGIN #46 SPED		36	1	361	10.2%
31	MADISON COUNTY SPED REGION 1		16	0	174	9.2%
32	PRESERVATION OF DIST. FOR SPED	PDME	17	1	210	8.6%
33	EAST ST. LOUIS AREA SPED		46	1	555	8.4%
34	SCHOOL ASSOC. FOR SPED	SAMED	35	3	447	8.6%
35	SPED ASSOC. ADAMS COUNTY		13	0	177	7.3%
36	FOUR RIVERS SPED		25	0	316	7.9%
37	KNOX-WARREN SPED		28	0	358	7.8%
38	SANDWICH AREA SPED		9	1	147	6.8%
39	COLLINSVILLE #10 SPED		4	0	60	6.7%
40	KANKAKEE #111 SPED		4	2	88	6.8%
41	LEE COUNTY SPED		4	2	60	10.0%
42	LA GRANGE AREA SPED	LAGSE	10	1	166	6.6%
43	EI COUNTY SPED		12	1	215	6.1%
44	MASON-PIATT SPED		12	0	215	5.6%
45	EVANSTON #65 SPED		6	1	120	5.8%
46	SPED COOP SOUTH COOK CTY	SPSED	30	0	547	5.5%
47	NORTHWEST SPED		9	1	166	6.6%
48	AERO SPED	AERO	9	0	177	5.1%
49	WEST CENTRAL ILL. SPED		19	0	378	5.0%
50	RURAL CHAMPAIGN COUNTY SPED		5	1	84	7.1%
51	SUB-URBAN JOINT TRI-CITY SPED		7	1	170	4.7%
52	SPED DISTRICT, MCHENRY COUNTY	SEDCH	9	4	286	4.5%
53	SPED DISTRICT, LAKE COUNTY	SEDCL	32	4	618	5.8%
54	FERMENDE SPED		3	0	71	4.2%
55	ROCKFORD #205		19	3	385	5.7%
56	HENRY-STARK SPED		3	0	68	4.4%
57	CANEDA AREA JT. AGMT SPED		4	0	115	3.5%
58	BOONE COUNTY SPED		3	0	86	3.5%
59	PROVISO AREA SEB. CHILD	PASD	7	0	201	3.5%
60	BLACKHAWK AREA SPED DIST.		13	0	381	3.4%
61	LIVINGSTON COUNTY SPED		4	0	151	2.6%
62	WOODFORD COUNTY SPED ASSOC.		1	0	68	1.5%
63	OAK PARK #97 SPED		1	0	68	1.5%
64	FORD-IROQUOIS SPED		2	0	68	2.9%
65	SPED ASSOC. PEORIA COUNTY	SEAPOO	3	1	146	2.7%
66	HENDERSON COUNTY SPED		2	0	68	2.9%
67	SWL CHILDREN HAVE OPPORTUNITY	SCHO	11	0	385	2.9%
68	CHAMPAIGN #4 SPED		2	0	166	1.2%
69	VANLEDEAR #30 SPED		4	0	351	1.1%
70	KANKAKEE AREA SPED COOP		3	0	179	1.7%
71	PEORIA #150 SPED		11	0	668	1.6%
72	KANKAKEE SPED		3	0	201	1.5%
73	TRI-CITY SPED ASSOC.		3	0	201	1.5%
74	EDGAR COUNTY SPED		1	0	68	1.5%
75	TAZEWELL-MASON SPED COOP		5	1	351	1.7%
76	CEC #100 SPED		1	0	340	0.3%
77	BLOOMINGTON DIV SPED		0	1	115	0.9%
78	EASTERN ILLINOIS	EIASE	4	0	429	0.9%
79	VERMILION ASSOC. OF SPED		2	0	223	0.9%
80	SPRINGFIELD #186 SPED		1	0	68	1.5%
81	LAKE OF I SPED		0	0	0	0.0%
82	SHERIF SCHOOL 10-7.02 GRANT PGM.		0	0	0	0.0%
83	JANP SPED		0	0	0	0.0%
84	LEVDEN AREA SPED		0	0	0	0.0%
85	LOGAN-MASON-MENARD ED SVS. PRG.		0	0	0	0.0%
86	MACKINAW VALLEY SPED		0	0	0	0.0%
87	MONROE-RANDOLPH ED. SVS REGION		0	0	0	0.0%
88	SOUTHEASTERN SPED	SSSE	0	0	0	0.0%
89	SPED ASSOC. FRANKLIN-JEFFERSON		0	0	0	0.0%
90	TRI-COUNTY SPED DIST.		0	0	0	0.0%
91	LINCOLN #18 SPED		0	0	0	0.0%
92	WABASH AND OHIO SPED		0	0	0	0.0%
93	WILLIAMSON COUNTY SPED		0	0	0	0.0%
	ILLINOIS TOTAL		3,405	80	28,000	12.2%

* NOTE: These data are preliminary, based upon a December, 1988, computer-generated report from the Illinois State Board of Education—data subject to revision.
Please see preceding pages in the Report for definitions of ISBE placement "codes."

TABLE 4*

ILLINOIS SCHOOL DISTRICTS/COOPS, RANKED BY % OF "SD" STUDENTS IN PRIVATE/OUT OF STATE

	District/Coop	Acronym	Code H "Jail"	Code O DOFS/DMHDD	Code P,Q Private Day/Res./ Out/State Public Day	Code R Out/State Res.	TOTAL "SD" STUDENTS	PRIVATE/ OUT/STATE PERCENTAGE	PERCENT IN CODES H - R
1	WOODFORD COUNTY SPED ASSOC.		0	0	7	0	11	87.5%	87.5%
2	ALTON #11 SPED		0	0	2	1	3	41.2%	41.2%
3	EAST ST. LOUIS AREA SPED		7	0	0	1	8	37.5%	37.5%
4	EVANSTON #202 SPED		0	0	0	0	4	25.0%	25.0%
5	TAZEWELL-MASON SPED COOP		0	0	0	0	4	25.0%	25.0%
6	KENDALL COUNTY SPED		0	0	0	0	5	20.0%	20.0%
7	AURORA (EAST) #131 SPED		0	0	0	0	5	20.0%	20.0%
8	TRI-CITY SPED ASSOC.		0	0	0	0	5	20.0%	20.0%
9	LOGEPORT AREA SPED COOP		0	0	0	0	5	20.0%	20.0%
10	MACKINAW VALLEY SPED		0	0	0	0	5	20.0%	20.0%
11	EAST DUPAGE SPED	EDSED	0	0	0	0	6	16.7%	16.7%
12	CHICAGO #299 SPED		0	0	0	0	6	16.7%	16.7%
13	SPED ASSOC. PEORIA COUNTY	SEAPOD	0	0	0	0	6	16.7%	16.7%
14	LIVINGSTON COUNTY SPED		0	0	0	0	6	16.7%	16.7%
15	MID VALLEY SPED		0	0	0	0	6	16.7%	16.7%
16	MAS-MAC-KENNEY SPED REGION 3		0	0	0	0	7	14.3%	14.3%
17	DUNDEE #300 SPED		0	0	0	0	7	14.3%	14.3%
18	ELGIN #46 SPED		0	0	0	0	7	14.3%	14.3%
19	S. WILL COUNTY COOP SPED	SCWSCO	0	0	0	0	7	14.3%	14.3%
20	SPED DISTRICT, MCHENRY COUNTY	SEDCM	0	0	0	0	7	14.3%	14.3%
21	OAK PARK #97 SPED		0	0	0	0	8	12.5%	12.5%
22	JOLIET #86 SPED		0	0	0	0	8	12.5%	12.5%
23	LINCOLNWAY AREA SPED		0	0	0	0	8	12.5%	12.5%
24	FEDERATION OF DIST. FOR SPED	FOSE	0	0	0	0	8	12.5%	12.5%
25	BELLEVILLE AREA SPED		0	0	0	0	9	11.1%	11.1%
26	RURAL CHAMPAIGN COUNTY SPED		0	0	0	0	9	11.1%	11.1%
27	MADISON COUNTY SPED REGION 1		0	0	0	0	9	11.1%	11.1%
28	LEE COUNTY SPED		0	0	0	0	9	11.1%	11.1%
29	EVANSTON #65 SPED		0	0	0	0	9	11.1%	11.1%
30	SUR-MARSH-PUT TRI-CITY SPED		0	0	0	0	9	11.1%	11.1%
31	SCHOOL ASSOC. FOR SPED	SASED	0	1	0	0	10	10.0%	10.0%
32	COOP ASSOC. FOR SPED	CASE	0	0	0	0	10	10.0%	10.0%
33	VALLEY VIEW #365U SPED		0	0	0	0	10	10.0%	10.0%
34	MADISON COUNTY SPED REGION 2		0	0	0	0	10	10.0%	10.0%
35	VERMILION ASSOC. OF SPED		0	0	0	0	10	10.0%	10.0%
36	NORTH SUB. SPED	NSSED	0	0	0	0	11	9.1%	9.1%
37	AURORA (WEST) #129 SPED		0	0	0	0	11	9.1%	9.1%
38	LEYDEN AREA SPED		0	0	0	0	11	9.1%	9.1%
39	CHAMPAIGN #4 SPED		0	0	0	0	11	9.1%	9.1%
40	BLOOMINGTON #87 SPED		0	0	0	0	11	9.1%	9.1%
41	LA GRANGE AREA SPED	LASSE	0	0	0	0	12	8.3%	8.3%
42	FORE--ROCKDOVE SPED		0	0	0	0	12	8.3%	8.3%
43	MAINE TWSHP SPED		0	0	0	0	12	8.3%	8.3%
44	NILES TWSHP SPED		0	0	0	0	12	8.3%	8.3%
45	WILMINGTON #209 SPED		0	0	0	0	12	8.3%	8.3%
46	EISENHOWER COOP		0	0	0	0	13	7.7%	7.7%
47	SOUTHWEST COOK CTY COOP ASSOC.		0	0	0	0	13	7.7%	7.7%
48	OAKWOOD AREA JT. AGMT SPED		0	0	0	0	13	7.7%	7.7%
49	NORTHWEST SPED		0	0	0	0	13	7.7%	7.7%
50	SI COUNTY SPED		0	0	0	0	13	7.7%	7.7%
51	KANKAKEE-IROQUOIS SPED		0	0	0	0	14	7.1%	7.1%
52	KANKAKEE AREA SPED COOP		0	0	0	0	14	7.1%	7.1%
53	DEKALB COUNTY SPED		0	0	0	0	14	7.1%	7.1%
54	LA SALLE COUNTY	LEASE	0	0	0	0	14	7.1%	7.1%
55	COLLINSVILLE #10 SPED		0	0	0	0	14	7.1%	7.1%
56	SPED ASSOC. ADAMS COUNTY		0	0	0	0	15	6.7%	6.7%
57	JOLIET #204 SPED		0	0	0	0	15	6.7%	6.7%
58	SPED COOP SOUTH COOK CTY	SPSED	0	0	0	0	15	6.7%	6.7%
59	KANKAKEE #111 SPED		0	0	0	0	15	6.7%	6.7%
60	SANGAMON AREA SPED		0	0	0	0	15	6.7%	6.7%
61	CHILE COUNTY SE COOP		0	0	0	0	16	6.3%	6.3%
62	SPRINGFIELD #186 SPED		0	0	0	0	16	6.3%	6.3%
63	BOONE COUNTY SPED		0	0	0	0	16	6.3%	6.3%
64	PEKARDEE SPED		0	0	0	0	16	6.3%	6.3%
65	SPED DISTRICT, LAKE COUNTY	SEDOL	0	0	0	0	16	6.3%	6.3%
66	PEORIA #150 SPED		0	1	0	0	17	5.9%	5.9%
67	SPED ASSOC. FRANKLIN--JEFFERSON		0	0	0	0	17	5.9%	5.9%
68	ROCKFORD #205		0	0	0	0	17	5.9%	5.9%
69	SOUTHEASTERN SPED	SESE	0	0	0	0	17	5.9%	5.9%
70	ENG. CHILDREN HAVE OPPORTUNITY	SCHO	0	0	0	0	17	5.9%	5.9%
71	BLACKHAWK AREA SPED DIST.		0	0	0	0	18	5.6%	5.6%
72	KANSARDA SPED		0	0	0	0	18	5.6%	5.6%
73	WEST CENTRAL ILL. SPED		0	0	0	0	18	5.6%	5.6%
74	TRI-COUNTY SPED DIST.		0	0	0	0	18	5.6%	5.6%
75	NORTHWEST SUB. SPED	NWSED	0	0	0	0	18	5.6%	5.6%
76	LINCOLN #18 SPED		0	0	0	0	19	5.3%	5.3%
77	MASSAC-PULT SPED		0	0	0	0	19	5.3%	5.3%
78	ASED SPED	ASPD	0	0	0	0	19	5.3%	5.3%
79	MID-CENTS SPED		0	0	0	0	19	5.3%	5.3%
80	WILMINGTON AREA SPEC. EVLD	PASD	0	0	0	0	19	5.3%	5.3%
81	LAKE OF I.I.N.O.I.S.		0	0	0	0	20	5.0%	5.0%
82	CHRIST SCHOOL 10--7.03 GRANT PSRA		0	0	0	0	20	5.0%	5.0%
83	EASTERN ILLINOIS	EIASE	0	0	0	0	20	5.0%	5.0%
84	FOUR RIVERS SPED		0	0	0	0	20	5.0%	5.0%
85	GRUNDY COUNTY SPED		0	0	0	0	20	5.0%	5.0%
86	HALLIDAY #40		0	0	0	0	21	4.8%	4.8%
87	HENRY-STARK SPED		0	0	0	0	21	4.8%	4.8%
88	JANP SPED		0	0	0	0	21	4.8%	4.8%
89	LOGAN-MASON-MENARD ED SVC. REG.		0	0	0	0	21	4.8%	4.8%
90	WASHGN-RANDOLPH ED. SVC REGION		0	0	0	0	21	4.8%	4.8%
91	WAUKEGAN #60 SPED		0	0	0	0	21	4.8%	4.8%
92	WILLIAMSON COUNTY SPED		0	0	0	0	21	4.8%	4.8%
93	WINNEBAGO COUNTY SPED		0	0	0	0	21	4.8%	4.8%
	ILLINOIS TOTAL		1,455	450	5,310	1,185	35,000		

* NOTE: These data are preliminary, based upon a December, 1988, computer-generated report from the Illinois State Board of Education—data subject to revision.
Please see preceding pages in the Report for definitions of IDEA placement "codes."

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Discussion

These comparative data presented in **Tables 2-4** for the 93 districts/coops in Illinois are a necessary, but not sufficient, measure of integrated education. There was some inconsistency between the data reported in the *Annual Reports to Congress* and in the 12/88 ISBE print-out (the slightly larger "MR" student numbers in the *Annual Reports* were probably due to duplicate counts). Nevertheless, whether Illinois served 6% of children with MR in regular classes and resource rooms (**Table 1**), or only 3% as indicated in **Table 2**, the need for improvement is obvious.

QUESTION 3: Are there funding "incentives" for out-of-home and/or out-of-state placements in private residential facilities and private day schools, in Illinois or out-of-state, rather than maintenance of children in regular LEA or co-op education programs?

> ***The private provider can actually spend an unlimited amount on program costs and its audit will dictate full reimbursement from the sending school district, which in turn gets reimbursed by the state according to [ISBE formula]*** (Moss, 1989, p. 5).

The following is an analysis of the manner in which "incentives" for out of school and or/out of district placements occur in Illinois, excerpted from a working draft produced in Spring, 1990, by the IPCDD in conjunction with the House Bill 69 planning process instituted by the Illinois General Assembly (IPCDD, 1990).

> The statewide average cost of a residential placement made by a school district is **$39,500**....Of that amount, $11,850 (30%) is tuition costs and $27,650 (70%) is room and board costs. **The $27,650 for room and board is paid by the ISBE at 100% from federal P.L. 94-142 "discretionary" dollars (approximately $8 million annually state-wide).**
>
> The tuition costs ($11,850) are reimbursed via the formula found in Section 14-7.02...[Chapter 122, *Illinois School Code*, which] calls for the school district to pay for the first $4,500 of the tuition costs. Of this amount, the ISBE reimburses the school district the portion of the $4,500 in excess of the district's per capita tuition cost.
>
> **"Poor" District Tuition Example.** If a district's average tuition cost is $4,000 (a relatively poor district), the ISBE will reimburse the district $500 of the first $4,500 of the total tuition cost. When the cost of private tuition exceeds $4,500 (which it usually does as indicated by the average private tuition costs of $11,850) the district pays an average amount over the $4,500 equal to the district's average per capita tuition cost. Since $11,850 minus $4,500 equals

$7,350, the "poor" district would be responsible for an additional $4,000.

The State pays for the remaining $3,350 [that is, $11,850 - (2 x $4,000, paid by the District) - ($500, paid by the State) = $3,350 remaining]. In this "poor" district, therefore, the district has paid $8,000 (2 district per capitas) and the State has paid $3,850.

"Wealthy" District Tuition Example. If the district's average per capita tuition costs are $12,000 (a relatively wealthy district) the state does not reimburse the district for any part of the first $4,500 of the total tuition cost. The "wealthy" district would be responsible for the entire $7,350 [that is, $7,350 + $4,500 = $11,850--still below the wealthy district's "tuition per capita" of $12,000].

Room and Board Payment by ISBE. ISBE pays for the entire room and board costs of $27,650 for both districts.

Comparison of the Tuition and Room & Board Payments: "Poor" and "Wealthy" District Examples. For the total cost of the residential placement ($39,500) the State has paid for $27,650 and the district has paid for $11,850 in the case of the "wealthy" district. For the "poor" district, the State has paid for $31,500 [$27,650 room and board + $3,850 tuition = $31,500] and the district has paid for $8,000.

The poor district paid two (2) of its "district per capitas" for the tuition portion of the residential placement, while the wealthy district paid for only 99% ($11,850/$12,000) of one "district per capita." Both districts were getting $39,500 worth of services for: 1) $8,000 in the poor district; and, 2) $11,850 in the wealthy district. **Proportional to the wealth of the districts,** there is an apparent financial incentive for placements into private day and/or residential facilities.

Another illustration of the incentive to place rather than to provide services and supports in the home school relates to the reimbursement mechanism for what are termed "extraordinary" programs. In Chapter 122, Section 14-7.02, of the *Illinois School Code* there is provision for "Children attending private schools, public out-of-state schools, public school residential facilities, or private special education facilities." On the other hand, Section 14-7.02A of the *School Code* provides for "Children requiring extraordinary special education services and facilities."

In reimbursement by the State Education Authority (SEA), there is significantly more available for Section 14-7.02 placements (private day or residential placements) [see description above] than the maximum of $2,000 which the State pays for 14-7.02A services.

That is, the SEA is contributing significantly more for private residential and day school tuition costs than it is paying for districts to attempt to serve children with special needs within the home school. [Members of the Subcommittee took note of the fact that many Section 14-7.02.A programs currently being operated are segregated in nature (students with disabilities are not in **regular education**); therefore, any increased funding/reimbursement levels instituted through this mechanism should be preceded by improved standards/regulations which emphasize integrative educational services.]

To realize cost incentives for LEAs, Freagon & Peters (1986) made the following recommendation:

> ***That the ISBE continue to put before the Illinois General Assembly, legislation to provide financial incentives for local school districts to provide education programs for children and youth in local public schools*** (p. 37).

Recent trends in the placements of children serve to illustrate the continuing problem. For example, a report from the Illinois State Advisory Council on the Education of Handicapped Children (Advisory Council, 1989) indicated that, between 1986/1987 and 1987/1988, **ISBE** "out-of-state private" placements increased from 334 to 431, or 29%. The highest percentage increases between the two school years were for children labeled "behavior disordered" (out-of-state private placements up 32%), and for children labeled "EMH" and "TMH" (placements up 40% and 29%, respectively).

"In-state private" placements increased from 7,653 to 7,844, or 2.5%. Within the "in-state private" placements by **ISBE**, the only category with an appreciable increase was for children labeled "behavior disordered," increasing from 4,127 to 4,425, or 7%. The document (Advisory Council, 1989) also noted that **Department of Children and Family Services (DCFS)** "out-of-state" placements increased from 29 in 1984 to 155 in 1988, or 434%. Finally, **Department of Mental Health/Developmental Disabilities (DMHDD)** "in-state" private placements declined by 8.5%, or from 615 to 563 between 1984 and 1987; however, DMHDD's "out-of-state" placements increased (1984-1987) from 36 to 58, or 61%. [Over-all, the DMH/DD-funded "private" placements declined by 5%, from 651 to 621.]

Illinois is not alone in providing financial incentives for placements of children outside of their home schools. Gartner & Lipsky (1987) described a similar financial mechanism in the state of New York; reference to **Table 1** indicates that New York in the 1986/1987 ranked near Illinois in terms of regular educational environments.

QUESTION 4: Are there issues related to the degree to which families of children with disabilities are supported in their efforts to maintain their children at home, and in local educational programs?

Members of the Subcommittee recognized a number of examples of families failing to receive the necessary supports.

- There were instances in which families had worked to obtain an out-of-district regular school placement for a child with special needs, but the LEA would resist paying for transportation.

- There were instances in which advocacy/parent organizations worked with family members, teaching them to "reach out" to school professionals and administrators; however, often these efforts at communication were not reciprocated.

- While respite care and other forms of family support funded by DMHDD were provided to some degree in Illinois, there was great variation between different communities or areas of the state in the availability of family support.

- Throughout state agencies, LEA's, and private service provider programs, there was a tendency to use terminology which unnecessarily emphasized the child's "disabilities." This in turn made it more difficult for families to "have high expectations for" their children (Turnbull & Turnbull, 1989).

The Subcommittee discussed the potential of "House Bill 69" (P.A. 86-921) which would provide a range of family support services including direct subsidies, or "stipends," for families. During the summer of 1990, the Governor's Office and the IPCDD are engaged in comprehensive planning activities related to the implementation of HB 69.

QUESTION 5: Are there inter-agency issues in the provision of those services and supports which are the most effective in maintaining children with disabilities at home, and in their local schools?

Although some of the information available recently from ISBE provides a better over-all "picture" of where children with disabilities are receiving educational services, and in what environments, there remains a problem of consistent reporting across agencies. The Subcommittee discussed examples of inter-agency issues in the education of children with disabilities:

- DCFS might find an appropriate foster home for a child, but then not be able to establish, with the LEA, an appropriate educational program.

- DMH/DD pays for "out-of-state" or other private residential placements; however, most of these individuals who return from these programs upon reaching adulthood require continuing residential services.

- "Case management" caseloads are too high; yet there is duplication of case management activities across agencies. DCFS regional guardians have extremely high numbers of "wards" for whose welfare they are responsible.

- There is a lack of a consistent "mission" or philosophy across all agencies in regards to achieving the best possible educational opportunities for children with disabilities. As a result, state agencies are too frequently in a position of "reaction" to problems, rather than taking a "proactive" approach.

Illinois and all other states are in the process of implementing the mandates of P.L 99-457, the Education of the Handicapped Act Amendments of 1986. With this Act's provisions for a statewide "inter-agency coordinating council," and with the strong emphasis on family involvement (the "Individualized Family Service Plan"), P.L. 99-457 can potentially have impact on inter-agency coordination and collaboration for infants and toddlers. Furthermore, the planning and implementation process which has been ongoing since 1987 has raised a number of critical issues relating to state agencies and their relationships to local communities and to families:

> ***If a provider-driven system [for infants and toddlers] poses the peril of insatiable runs on the state treasury, then a state-driven system poses the greater peril of failing children and families through a lowest-common-denominator cookie cutter approach. The [Illinois] special education system provides us with daily negative examples and we would argue that part of the Congressional intent in passing P.L. 99-457 was to remedy this dysfunction*** (VIC, 1990, p. 8).

QUESTION 6: Are there problems in Illinois with the over-all philosophy or "vision" for attainment of integrated educational opportunities for children with disabilities?

> ***Neither regular nor special education administrators in Illinois are trained or have the experience to design, implement, and evaluate programs that have come to be known as "accepted best practices" educational technology for students with severe handicaps*** (Freagon & Peters, 1986, p. 44).

Review of the "state-of-the-art" and "best practice" information from the Syracuse leadership institute (Taylor et al., 1989), and the discussions by the Subcommittee underscored one major issue: Maximizing integrated educational opportunities for children with disabilities involves all levels of government, private service and advocacy organizations, and academic settings. Members of the Subcommittee spoke of the lack of "top down" philosophical direction, and there was evidence as well of a lack of communication "laterally" across organizations, districts and governmental units which should have the same mission and goals.

As noted in the discussion above (**Question 4**), there are too many examples in Illinois of the use of terminology which unnecessarily emphasizes children's disabilities, a manifestation of the lack of sensitivity on the part of state agencies and other providers of educational services. Also discussed by the Subcommittee was the tendency of state agencies to "react" to problems, in the absence of a philosophical focus, or vision, for what is best in educating children.

Most importantly, though, the data in **Table 1** comparing Illinois' placement rates in regular education to other states is evidence of the lack of commitment to integrated education for the state's students with disabilities.

SUBCOMMITTEE RECOMMENDATIONS

Five major recommendations emerged from the work of the Subcommittee.

RECOMMENDATION 1. By increasing incentives for programs in the home school, eliminate the current funding incentives which promote placements of children in residential and private day programs.

First, there are recommendations addressing the funding "incentive" for placements outside the home school which is inherent in current ISBE statutes.

- **The state should seriously consider the original mandates of P.L. 94-142, and reconsider whether it is appropriate to utilize P.L. 94-142 "discretionary" funds for programs which remove children from their home schools.**

By state statute, "room and board" funds are authorized at up to 12.5% of the available federal P.L. 94-142 "discretionary" funds. That is, ISBE currently receives 25% of P.L. 94-142 federal dollars, (approximately $16 million out of $65 million) and the 1978 amendment to Section 14-8.01 of the *School Code* stipulated that "an amount equal to one-half of the state education agency's share of P.L. 94-142 federal monies, or so much thereof as may actually be needed, shall annually be appropriated for the additional costs of providing for room and board for those children placed pursuant to Section 14-7.02 of the Act."

- **A special General Fund line item must be established within the ISBE budget on an interim basis for "room and board" payments. This General Fund line item must be reviewed for any growth in reimbursements for residential placements.**

According to Johns (1989), the problem of "incentives" in out-of-district placements is related to a failure to tie personnel reimbursement to costs, and the failure to use

"extraordinary" (14-7.02A) funds for children with extraordinary needs. Personnel reimbursement (teacher and support) did not increase from 1975 to 1985; although it reached $8,000 per 1985 legislation, it was not funded at that level until FY 1990, and is frozen at $8,000 without additional legislation. The average Illinois special education teacher makes over $3,000 less per year than the average teacher. There is the incentive for school districts to use 14-7.02A "extraordinary" funds for more and more students (not for the "extraordinary" need children). Furthermore there is an "informal agreement" by districts to make 14-7.02A claims only for children whose program costs are 1.5 times the district per capita; however, school districts (without personnel reimbursement increases) are likely to abandon this "informal agreement."

However, increases in state personnel funding must be carefully weighed to promote equitable funding across Illinois. For example, inequities in funding for education throughout the state are receiving much attention currently, and there is likely to be litigation to address the district-to-district variances in educational funding.

> ***In 1989, both the Kentucky and Texas Supreme Courts declared their respective state mechanisms for funding public education to be unconstitutional. Illinois could also face such a lawsuit....While Illinois courts have ruled in cases dealing with earlier state funding mechanisms that the Illinois Constitution sets goals for the state to reach for public education, this does not mean that a legal challenge to the current funding mechanism is not forthcoming. Any reform of the current formula must strengthen the school funding system to enhance the goal of equalizing educational opportunity for all children in Illinois public schools*** (State of Illinois, 1990, p. 27).

- **Personnel reimbursement by the state for teachers of students with disabilities must be increased, to assist in the development of quality educational opportunities in children's home schools.**

Additional recommendations:

- **Provide for individual(s) (including parents and advocates) with commitment to integrated education ("LRE") to review and challenge any application for residential placement.**

- **Publicize more effectively the positive outcomes of those innovative programs which districts have employed to maintain children in their home schools.**

RECOMMENDATION 2. Increase the amount and types of family support services, so families are able to keep their children with disabilities at home, and in their home schools.

A major issue is the dialogue between parents and schools, and the responsibility which schools must take in assuring that ongoing dialogue occurs.

The recommendations from Turnbull & Turnbull (1989) cited above paralleled the discussions of the Subcommittee. Family support services should be provided in a timely fashion, and the service must be sensitive to what the family needs to best build upon its own strengths.

- Family support must not be overly intrusive. Family support staff who work directly in the family's home must respect the family's privacy; they must be trained, in the best sense of "professionalism," about maintaining the family's right to privacy (confidentiality).

- Families' and students' integration into the regular school inherently results in unique needs for family support, including communication with other parents who have undergone the same type of experience.

- The state must recognize and complement the efforts of Illinois' parent support and advocacy organizations. These organizations have emphasized working effectively with professionals (physicians, psychologists, social workers, teachers, other school personnel), and have often been there for families when state services (i.e., case management) were not available.

The Subcommittee discussed at some length the positive implications of House Bill 69. Both Public Act (PA) 85-938, the "Family Assistance and Support Program," and PA 86-921, the "Home-Based Support Services Law for Mentally Disabled Children and Adults" hold much promise. The first provides up to $2,500 per family per year (with some exceptions allowing higher amounts) and is designed to cover an array of respite, counseling and other in-home support services. P.A. 86-921 would provide direct "stipends" to families.

The Governor's Office and the IPCDD are currently working on cost projections related to implementation of HB 69 provisions, and the Subcommittee encourages the IPCDD to fully consider the types of family support needed by families who are working to maintain their children in regular schools, or who must consider the various types of "transition" throughout the child's educational involvement. It is important that existing peer-counseling efforts (e.g., the "mentor" concept suggested by Turnbull & Turnbull, 1989) offered by private advocacy or parent organizations not be supplanted, but rather supplemented.

A parent who is now an attorney lived in Massachusetts when her daughter was entering school. Massachusetts for many years has had impressive educational programs for children with disabilities (see Table 1). In addition, since the early '70's there has been extensive respite care available for families. For example, extended family members (uncles,

aunts, cousins) who received basic training from the Massachusetts Department of Mental Health could be paid to provide respite care to the family for a total of several weeks throughout the year.

> • ***When I talk to parents here in Illinois, I realize how important the educational programs and the family support were in Massachusetts when I needed them. I don't see how parents in Illinois can cope.***

As noted in the discussion below about case management, it is often difficult for professionals to reach out to the family; similarly, parents might recognize that a teacher needs help--but the teacher is hesitant to admit this, and the parent is reluctant to "go over the head" of a teacher who is otherwise supportive. There is also the problem of school personnel not being knowledgeable about "support" services outside of the school (e.g. respite care). All agencies must become knowledgeable, for parents, about the total range of services and supports available in different areas of the state.

In order to improve communication, it is sometimes necessary for school personnel to accommodate to family schedules: evening meetings or telephone conversations; provision of transportation and child-care; a "mentor" program arranged whereby another parent attends a school meeting to help explain/translate; home visits, etc.

RECOMMENDATION 3. Re-conceptualize "case management" to better link families and their children with the appropriate services and supports. This means enhancing and supporting, not supplanting, the family's natural support network.

A parent in Illinois who is a professional, and very knowledgeable about the service system, told of the difficulty of relating to that system:

> • ***I did not need money, because family members helped out. But in the face of all the agency requirements, forms, and procedures, I was lost. Then, a friend who was the director of a community agency said "I'll be your case manager."***

Carlson (1983) addressed the need for a "new level of professional--a change agent, a facilitator, a mediator, an advocate, a boundary crosser." This person would take on new challenges, since the professional or business world tends to be structured in a linear fashion, and "moving up the ladder" is what is rewarded. "Reaching out" and crossing boundaries has a more negative connotation. Case management professionals may see family requests/demands as difficult to carry out...following the lead of parents can put professionals in conflict with established systems. At present, there is no tangible reward for group accomplishments, nor is there facilitation of group problem solving. Finally, there is no incentive for inter-agency cooperation.

There was discussion within the Subcommittee about the problems of excessive case management. This can occur when case management is vested in a "role" or function within a state agency, rather than seen as a "concept" which must take the family's and the child's perspective across agencies. An example was provided from Michigan, in which the family meets with an inter-agency committee, and then is allowed to select an individual (professional) from the committee with whom the family is most comfortable. This selected professional then becomes the family's "case manager" across agencies, for the period of time in which this is needed. There have been examples as well in Illinois, in which inter-disciplinary teams or Individualized Education Plan (IEP) committees were structured in such a way that the family could select a "case manager." This case manager was the individual most compatible with the family's present service needs, and could maintain contact with the whole team, or committee.

There is only one independent "case management" agency in Illinois (Community Alternatives Unlimited on Chicago's north side). Other "case coordination units" which are funded by DMH/DD under grant-in-aid code "50" are attached to service provider organizations. Furthermore, the newly established "Pre-Admission Screening--PAS" entities funded by DMH/DD in conjunction with federal "OBRA-87" requirements vary in the degree of independence from service providers. Finally, PAS entities at present are focusing on adults (in nursing homes).

Conroy and Feinstein (1990) have emphasized the importance of "case management" as a variable in the "quality" of service delivery.

> **Requirement 1: Reasonable Caseloads**....work done in Pennsylvania and many other states suggests that certain caseload parameters can be set. These parameters establish a reasonable and manageable caseload to include 30-50 individuals.
>
> **Requirement 2: Independence from Service Delivery System** Case managers, in addition to being service coordinators and monitors, are consumer advocates....Many states have begun to look at providing case management in a relatively conflict free environment. In one part of Colorado, for example, the community center board contracts out all of its services with the exception of case management. In Pennsylvania, the state only funds new case management activities that are free of the conflicts...(pp. 268, 269).

- **Illinois must re-conceptualize case management, building upon the good models which exist here, and in other states. There must be careful consideration of the many forms of case management which are now provided by individual parents (the "mentor" concept) and by parent support and advocacy organizations. These efforts should be complemented, not supplanted.**

RECOMMENDATION 4. Build upon "best practice" models to develop a more consistent and positive state philosophy in regard to LRE, mainstreaming, and integration opportunities for all children with disabilities.

As noted in the Leadership Institute materials cited above, there are "islands of excellence" around the country, and this certainly includes Illinois. There are excellent districts, excellent programs within districts, excellent teachers and administrators, and, perhaps most importantly, excellent examples of parents and their children who are working and learning effectively within the context of their local schools. The recommendations from Biklen (1989) can serve as a check-list of the issues, the policies, the training focus, the case studies, and of other ideas which should be considered in creating integrated educational opportunities.

There are accomplishments in Illinois on which to build future policies and activities. For example, The Illinois State Board of Education has instituted Project Choices (acronym for "Children Have Opportunities in Integrated Community Environments"). Through its program of needs assessment (related to principles, goals, best practices), technical assistance, and regional training institutes, Project Choices works with selected "sites" (schools) around the state. The goal of Project Choices is:

> ***...to develop integrated educational options for students with severe disabilities in communities where integrated options are not available.***

In addition, the IPCDD has instituted a series of Policy Statements, which provide direction for the state in integrating students with disabilities into their home schools. There are policy statements on *The Role of Education in Preparing Students with Developmental Disabilities for Adulthood*; on *Least Restrictive Environment*; and on *Free and Appropriate Public Education*. For example:

> ***The role of education in the lives of people with developmental disabilities is critical, for this system serves students during the important developmental years when the course of their future is charted*** *(The Role of Education in Preparing Students with Developmental Disabilities for Adulthood*, 3/14/89).

These IPCDD policy statements link research, policy and "best practices," and can serve as an important foundation for improvement.

RECOMMENDATION 5. With funding from the Illinois Planning Council on Developmental Disabilities and/or from other state agencies, support case studies of successful schools, and studies (including a survey of families) to better identify the steps needed to improve

integrated educational opportunities for Illinois' children with disabilities. A financial analysis should be commissioned, to study the incentives which now promote placements outside the home school.

Financial Analysis. While "room and board" costs in private residential placements are paid for out of federal P.L. 94-142 funds, reference to **Appendix II** reveals that virtually all of the students in placements with Codes N through R ("jail,"; "DMH/DD or DCFS"; "private day school"; "in-state private residential"; and "out-of-state private residential") are enrolled under Chapter 1, P.L 89-313. According to a recent General Accounting Office (GAO) report (GAO, 1989), the Chapter 1 [P.L. 89-313] program for students with handicaps is a "small bonanza for the few states that tap it deeply." The report calls for restructuring of the program to distribute funds more evenly and to target students with severe handicaps better.

> ***P.L. 89-313...was enacted in 1965 to fund state schools for severely disabled students...four of the states that do not limit their [enrollment] count to severely handicapped children--Illinois, Massachusetts, New York and Pennsylvania--dominate the Chapter 1 handicapped program...The four states accounted for 47 percent of the P.L. 89-313 enrollment in October, 1987, even though they enrolled only 20 percent of the total number of handicapped children in the nation [under both P.L. 89-313 and P.L. 94-142]...Although [the P.L. 89-313 transfer provision] was meant to encourage mainstreaming, most state officials do not consider the transfer provision an incentive to deinstitutionalize severely disabled children...P.L. 94-142 is a greater impetus*** (GAO, 1989, cited in *Education of the Handicapped*, June 7, 1989, pp, 5-6).

The National Association of State Directors of Special Education (NASDSE) had resisted proposals (like GAO's) for restructuring P.L. 89-313 two years previously, arguing that P.L. 89-313 and P.L. 94-142 should not be merged until the per-student grant under P.L. 94-142 equalled that under P.L. 89-313--which was not imminent, since it would require huge growth in P.L. 94-142 funding.

The inter-relationship of Illinois' directed use of P.L. 89-313 funds, and the dedication of $8.1 million in federal P.L. 94-142 funds, to private day and residential placements of students with disabilities should be more carefully examined.

Questions to be addressed might include:

- Is there any correlation between "per capita tuition charge" amounts in local cooperatives/joint agreements, and their placement percentages in private day and residential programs?

- Would it be feasible to allocate funds to districts (cooperatives/joint

agreements) in proportion to each one's share of the state's total special education population?

- Should districts which do not utilize "room and board" funds for residential placements be allowed to use those funds for innovative inclusionary programs?

A more in-depth analysis of the trends in cooperatives/joint agreements over time should be conducted. Data should be available via ISBE computers which would provide breakdowns by age group, by federal education program, and by "LRE" placement. That is, while these data were available to the Subcommittee in hard copy form, more useful analyses could be performed if the data were provided in a computer file format. Finally, as noted by Biklen (1989), there should be an examination of "funding methods in states that have achieved a high level of integration."

Case studies of successful schools. Recommendations by Biklen (1989) cited above addressed the benefits of case studies of successful programs. Case studies in Illinois, particularly related to the impact of Project Choices, could provide valuable information on how integration of students with disabilities actually works.

Study of families. A sensitive survey might be designed, to ask parents why it was necessary to pursue placement in a residential or private day school. Such a survey could provide valuable information about which critical services or supports were not available, or which, if available, were not appropriate or adequate.

SUMMARY

This Subcommittee report provides a general outline of the issues, strengths, and specific problems of Illinois' educational system for students with disabilities. Much of the literature cited, and many of the discussions of the Subcommittee pointed to the need for a comprehensive, state-wide, affirmation of the right of each student to have an integrated educational experience within his or her home school.

The ISBE and all other state agencies represented on this Subcommittee are involved in the implementation of P.L. 99-457 (the "Part H" early intervention amendments to P.L. 94-142). To the degree that the implementation of "Part H" leads to improved collaboration between state agencies, and with communities, service providers and families, there could be improved collaboration as well during the regular school years. Furthermore, P.L. 100-407, the Technology-Related Assistance for Individuals with Disabilities Act of 1988, embodies inter-agency collaboration in expanding assistive technology devices and services. ISBE should be encouraged to carry into these inter-agency contacts a strong advocacy for the application of technology to the needs of school children, and a constant attention to the impact which various life-span "transitions" have on families of children with disabilities. The

IPCDD has established policy statements on transition, and has funded projects in this area.

Five (5) recommendations emerged from the work of this Subcommittee. These are detailed in the Report above.

1. By increasing incentives for programs in the home school, eliminate the current funding incentives which promote placements of children in residential and private day programs.

2. Increase the amount and types of family support services, so families are able to keep their children with disabilities at home, and in their home schools. A major issue is the dialogue between parents and schools, and the responsibility which schools must take in assuring that ongoing dialogue occurs.

3. Re-conceptualize "case management" to better link families and their children with the appropriate services and supports. This means enhancing and supporting, not supplanting, the family's natural support network.

4. Build upon "best practice" models to develop a more consistent and positive state philosophy in regard to LRE, mainstreaming, and integration opportunities for all children with disabilities.

5. With funding from the Illinois Planning Council on Developmental Disabilities and/or from other state agencies, support case studies of successful schools, and studies (including surveys of families) to better identify the steps needed to improve integrated educational opportunities for Illinois' children with disabilities. A financial analysis should be commissioned, to investigate the incentives which now promote placements outside the home school.

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APPENDIX II
DATA TABLES ON ILLINOIS

ILLINOIS SPECIAL EDUCATION STUDENTS WITH MR, DECEMBER, 1988

	P.L. 94-142				P.L. 89-313				P.L. 89-313 + P.L. 94-142				
	TMH	EMH	S/PMH	TOTAL	TMH	EMH	S/PMH	TOTAL	TMH	EMH	S/PMH	TOTAL	LRE %
REGULAR EDUCATION	11	761	3	775	15	51	1	67	26	812	4	842	3%
Birth to 2 Years				0				0	0	0	0	0	
Three to Five Years	1	11	1	13	14	4		18	15	15	1	31	
Six to Fifteen Years	7	376	2	385	1	18	1	20	8	394	3	405	
Sixteen to 21 Years	3	374		377		29		29	3	403	0	406	
SPECIAL EDUCATION	358	12,271	15	12,644	2,998	3,101	276	6,375	3,356	15,372	291	19,019	72%
Birth to 2 Years				0				0	0	0	0	0	
Three to Five Years	12	340	7	359	223	272	72	567	235	612	79	926	
Six to Fifteen Years	181	8,321	7	8,509	1,958	2,272	149	4,379	2,139	10,593	156	12,888	
Sixteen to 21 Years	165	3,610	1	3,776	817	557	55	1,429	982	4,167	56	5,205	
SPECIAL PUBLIC SCHOOL	194	89	53	336	2,509	161	732	3,402	2,703	250	785	3,738	14%
Birth to 2 Years	7			7				0	7	0	0	7	
Three to Five Years	11	57	18	86	219	95	114	428	230	152	132	514	
Six to Fifteen Years	107	23	26	156	1,165	42	415	1,622	1,272	65	441	1,778	
Sixteen to 21 Years	69	9	9	87	1,125	24	203	1,352	1,194	33	212	1,439	
DISTRICT RESIDENTIAL	0	0	0	0	9	0	6	15	9	0	6	15	0%
Birth to 2 Years				0				0	0	0	0	0	
Three to Five Years				0				0	0	0	0	0	
Six to Fifteen Years				0	2		4	6	2	0	4	6	
Sixteen to 21 Years				0	7		2	9	7	0	2	9	
PHIL ROCK CENTER	0	0	0	0	1	0	0	1	1	0	0	1	0%
Birth to 2 Years				0				0	0	0	0	0	
Three to Five Years				0				0	0	0	0	0	
Six to Fifteen Years				0	1			1	1	0	0	1	
Sixteen to 21 Years				0				0	0	0	0	0	
SCHOOL IN JAIL	0	3	0	3	2	1	0	3	2	4	0	6	0%
Birth to 2 Years				0				0	0	0	0	0	
Three to Five Years				0				0	0	0	0	0	
Six to Fifteen Years		2		2	2	1		3	2	3	0	5	
Sixteen to 21 Years		1		1				0	0	1	0	1	
DMH/DD OR DCFS	0	0	1	1	30	2	220	252	30	2	221	253	1%
Birth to 2 Years				0				0	0	0	0	0	
Three to Five Years				0			7	7	0	0	7	7	
Six to Fifteen Years				0	9	2	84	95	9	2	84	95	
Sixteen to 21 Years			1	1	21		129	150	21	0	130	151	
PRIVATE DAY SCHOOL	0	0	0	0	802	59	955	1,816	802	59	955	1,816	7%
Birth to 2 Years				0				0	0	0	0	0	
Three to Five Years				0	99	1	125	225	99	1	125	225	
Six to Fifteen Years				0	398	33	594	1,025	398	33	594	1,025	
Sixteen to 21 Years				0	305	25	236	566	305	25	236	566	
IN-STATE PRIVATE RES.	0	0	0	0	162	13	434	609	162	13	434	609	2%
Birth to 2 Years				0				0	0	0	0	0	
Three to Five Years				0	9		38	47	9	0	38	47	
Six to Fifteen Years				0	81	1	224	306	81	1	224	306	
Sixteen to 21 Years				0	72	12	172	256	72	12	172	256	
OUT-OF-STATE PRIVATE	0	0	0	0	36	10	12	58	36	10	12	58	0%
Birth to 2 Years				0				0	0	0	0	0	
Three to Five Years				0				0	0	0	0	0	
Six to Fifteen Years				0	6	2	8	16	6	2	8	16	
Sixteen to 21 Years				0	30	8	4	42	30	8	4	42	
HOMEBOUND	5	16	8	29	0	0	0	0	5	16	8	29	0%
Birth to 2 Years		5	2	7				0	0	5	2	7	
Three to Five Years	1	7	2	10				0	1	7	2	10	
Six to Fifteen Years	3	2	2	7				0	3	2	2	7	
Sixteen to 21 Years	1	2	2	5				0	1	2	2	5	
HOSPITAL	0	1	0	1	0	0	0	0	0	1	0	1	0%
Birth to 2 Years				0				0	0	0	0	0	
Three to Five Years				0				0	0	0	0	0	
Six to Fifteen Years				0				0	0	0	0	0	
Sixteen to 21 Years		1		1				0	0	1	0	1	
GRAND TOTAL	568	13,141	80	13,789	6,564	3,398	2,636	12,598	7,132	16,539	2,716	26,387	AGE %
Birth to 2 Years	7	5	2	14	0	0	0	0	7	5	2	14	0%
Three to Five Years	25	415	28	468	564	372	356	1,292	589	787	384	1,760	7%
Six to Fifteen Years	298	8,724	37	9,059	3,623	2,371	1,479	7,473	3,921	11,095	1,516	16,532	63%
Sixteen to 21 Years	238	3,997	13	4,248	2,377	655	801	3,833	2,615	4,652	814	8,081	31%

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ILLINOIS SPECIAL EDUCATION STUDENTS WITH PH/C; D/B; & BD, DECEMBER, 1988

	P.L. 94-142				P.L. 89-313				P.L. 89-313 + P.L. 94-142				
	PH/C	D/B	BD	TOTAL	PH/C	D/B	BD	TOTAL	PH/C	D/B	BD	TOTAL	LRE %
REGULAR EDUCATION	333	0	5,031	5,364	243	1	139	383	576	1	5,170	5,747	20%
Birth to 2 Years	2			2				0	2	0	0	2	
Three to Five Years	31		26	57	19		2	21	50	0	28	78	
Six to Fifteen Years	246		3,445	3,691	183	1	97	281	429	1	3,542	3,972	
Sixteen to 21 Years	54		1,560	1,614	41		40	81	95	0	1,600	1,695	
SPECIAL EDUCATION	233	1	5,233	5,467	1,363	15	6,161	7,539	1,596	16	11,394	13,006	45%
Birth to 2 Years	1			1				0	1	0	0	1	
Three to Five Years	58	1	410	469	340	1	363	704	398	2	773	1,173	
Six to Fifteen Years	152		3,837	3,989	832	13	4,675	5,520	984	13	8,512	9,509	
Sixteen to 21 Years	22		986	1,008	191	1	1,123	1,315	213	1	2,109	2,323	
SPECIAL PUBLIC SCHOOL	234	0	285	519	789	4	3085	3878	1023	4	3370	4397	15%
Birth to 2 Years	7			7				0	7	0	0	7	
Three to Five Years	52		37	89	244	1	97	342	296	1	134	431	
Six to Fifteen Years	102		116	218	408	3	1774	2185	510	3	1,890	2403	
Sixteen to 21 Years	73		132	205	137		1214	1351	210	0	1,346	1556	
DISTRICT RESIDENTIAL	0	0	0	0	1	0	77	78	1	0	77	78	0%
Birth to 2 Years				0				0	0	0	0	0	
Three to Five Years				0				0	0	0	0	0	
Six to Fifteen Years				0	1		34	35	1	0	34	35	
Sixteen to 21 Years				0			43	43	0	0	43	43	
PHIL ROCK CENTER	0	0	0	0	0	24	0	24	0	24	0	24	0%
Birth to 2 Years				0				0	0	2	0	2	
Three to Five Years				0		2		2	0	9	0	9	
Six to Fifteen Years				0		9		9	0	13	0	13	
Sixteen to 21 Years				0		13		13	0	0	0	0	
SCHOOL IN JAIL	0	0	9	9	0	0	1,013	1,013	0	0	1,022	1,022	4%
Birth to 2 Years				0				0	0	0	0	0	
Three to Five Years				0				0	0	0	0	0	
Six to Fifteen Years			5	5			356	356	0	0	361	361	
Sixteen to 21 Years			4	4			657	657	0	0	661	661	
DMH/DD OR DCFS	0	0	0	0	0	0	694	694	0	0	694	694	2%
Birth to 2 Years				0			2	2	0	0	2	2	
Three to Five Years				0			453	453	0	0	453	453	
Six to Fifteen Years				0			239	239	0	0	239	239	
Sixteen to 21 Years				0				0	0	0	0	0	
PRIVATE DAY SCHOOL	0	0	2	2	157	0	3,084	3,241	157	0	3,086	3,243	11%
Birth to 2 Years				0				0	0	0	0	0	
Three to Five Years				0	17		51	68	17	0	51	68	
Six to Fifteen Years			2	2	99		2,026	2,125	99	0	2,028	2,127	
Sixteen to 21 Years				0	41		1,007	1,048	41	0	1,007	1,048	
IN-STATE PRIVATE RES.	0	0	4	4	30	0	225	255	30	0	229	259	1%
Birth to 2 Years				0				0	0	0	0	0	
Three to Five Years				0				0	0	0	0	0	
Six to Fifteen Years			2	2	16		127	143	16	0	129	145	
Sixteen to 21 Years			2	2	14		98	112	14	0	100	114	
OUT-OF-STATE PRIVATE	0	0	0	0	2	0	195	197	2	0	195	197	1%
Birth to 2 Years				0				0	0	0	0	0	
Three to Five Years				0				0	0	0	0	0	
Six to Fifteen Years				0	1		72	73	1	0	72	73	
Sixteen to 21 Years				0	1		123	124	1	0	123	124	
HOMEBOUND	56	0	14	70	0	0	1	1	58	0	209	267	1%
Birth to 2 Years	5			5				0	5	0	0	5	
Three to Five Years	14			14				0	14	0	0	14	
Six to Fifteen Years	23		7	30				0	24	0	79	103	
Sixteen to 21 Years	14		7	21			1	1	15	0	130	145	
HOSPITAL	10	0	32	42	0	0	2	2	10	0	34	44	0%
Birth to 2 Years				0				0	0	0	0	0	
Three to Five Years				0				0	0	0	0	0	
Six to Fifteen Years	5		15	20			2	2	5	0	17	22	
Sixteen to 21 Years	5		17	22				0	5	0	17	22	
GRAND TOTAL	866	1	10,610	11,477	2,585	44	14,676	17,305	3,453	45	25,480	28,978	AGE %
Birth to 2 Years	15	0	0	15	0	0	2	2	15	2	2	19	0%
Three to Five Years	155	1	473	629	620	4	966	1,590	775	12	1,439	2,226	8%
Six to Fifteen Years	528	0	7,429	7,957	1,540	26	9,402	10,968	2,069	30	16,903	19,002	66%
Sixteen to 21 Years	168	0	2,708	2,876	425	14	4,306	4,745	594	1	7,136	7,731	27%